	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)			E NUMBE	BER: PAGE 22 / 28					
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check or 21b 27	22 28a	X 23 28b	24 28c		25 29	26 30b	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee											
\rangle	NAME OF COMMITTEE (In Full) American Academy of Pediatric Dentistry Political Action Committee										
۹.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE LIEBERMAN Mailing Address PO BOX 231294		Transaction ID: SB23.10375 Date of Disbursement					Y			
	STATE HOUSE SQUARE							^			
	•	State Zip Code CT 06123			Amou	nt of Each	n Disburs	ement	this P	eriod	
	Purpose of Disbursement Lieberman CT 2006 Senate General] L.		• • •	, 50	0.00.0	00	
	Candidate Name			tegory/ Type							
	Office Sought: House Disburse X Senate President State: CT District: 00	ment For: 2006 Primary X General Other (specify)									
3.	Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS				Transaction ID: SB23.10290 Date of Disbursement						
	Mailing Address PO Box 23940					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$					
	•	State Zip Code CA 93121			Amou	nt of Each	n Disburs			-	
	Purpose of Disbursement Capps CA 2006 House General] L.			. 10	0.00.0	00	
	Candidate Name			tegory/ ype							
	Office Sought: X House Senate President State: CA District: 23	ment For: 2006 Primary X General Other (specify)									
Э.	Full Name (Last, First, Middle Initial) FRIENDS OF ROGER WICKER					action ID		10352)		
	Mailing Address P.O. Box 874				0 9	M / D.	13 /	^Y 2	0 ŏ 6	Y	
	•	State Zip Code MS 38802			Amou	nt of Each	n Disburs			-	
	Purpose of Disbursement Wicker MS 2006 House General							50	0.00.0	00	
	Candidate Name			tegory/ ype							
	Office Sought: X House Senate President State: MS District: 01	ment For: 2006 Primary X General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)											
TOTAL This Period (last page this line number only)											